2001

RECEIVED
CENTRAL FAX CENTER

FEB 2 5 2004

OFFICIAL

Theravance

Facsimile Cover Sheet

To:

Mail Stop AF

Commissioner for Patents

U. S. Patent and Trademark Office

Fax:

703-872-9306

From:

Joyce Cohen, Reg. No. 44,622

Patent Department

Theravance, Inc.

Telephone:

650 808-6144

Fax:

650 808-6078

Date: # of pages:

February 25, 2004

13 (including this page)

If there are any problems in receiving this transmission, please call Barbara Bryant at (650) 808-6404.

Re: Amendment After Final Rejection and Response Under 37 C. F. R. §1.116

U. S. Serial Number: 009/456,429

Examiner: Maurie Garcia Baker

Group Art Unit: 1639

Attorney Docket No.: P-015-RP1

This transmission contains the following papers:

- 1. Amendment After Final Rejection and Response Under 37 C. F. R. §1.116 (10 pages)
- 2. Fee Transmittal for FY 2004 (1 page) and a duplicate copy

Certificate of Facsimile Transmission

I hereby certify that this correspondence is being transmitted on the date shown below via facsimile to Mail Stop AF, TC 1600, Commissioner for Patents, United States Patent and Trademark Office at the facsimile number indicated below.

Date: 10 bruary 25, 2004

Facsimile Number: (703) 872-9306

~,· <u>~ </u>

PRIVILEGED AND CONFIDENTIAL

FFF TRANSMITTAL

Complete If Known

PTO/SB/17 (10-03)
Approved for use through 07/31/2006, DMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid DMB control number.

for FY 2004		Application Number		09/456,429					
		Filing Date			December 8, 1999				
Effective 10/01/2003. Petent fees are subject to annual revision.	First Named Inventor			Yu-l	Yu-Hua Ji				
	DOS. Patent fees are subject to annual revision. Examiner Name			Maurie Garcia Baker					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			1639					
TOTAL AMOUNT OF PAYMENT (\$) 210	Attom	ey Dock	et No.	P-01	5-RP1	ノ			
METHOD OF PAYMENT (check all that apply)				FEE (ALCULATION (continued)				
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None	3. AD	DITIO	NAL FE	ES					
Order Deposit Account:	<u>Large</u>	Entity	Small E	ntity		•			
	Fee	Fee	Fee	Fee	Fee Description	Fee Paid			
Deposit Account 50-0344	Gode 1051	(S) 130	Code 2051	(\$) 65	Surcharge - late filing fee or oath				
Number	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.				
Deposit	1053	130	1053	130	Non-English specification				
Account Theravance, Inc. Name	1812	2,520	1812	2,520	For filing a request for reexamination				
The Director is authorized to: (check all that apply)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action				
☐ Charge fee(s) indicated below	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month				
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	210			
1. BASIC FILING FEE	1253 1254	950 1,480	2263 2254	475 740	Extension for reply within third month				
Large Entity Small Entity Fee Fee Fee Fee Description					Extension for reply within fourth month				
Code (\$) Code (\$) Fee Paid	1255 1401	2,010 330	2255 2401	1,005 165	Extension for reply within fifth month Notice of Appeal				
1001 770 2001 385 Utility filing fee	1402	330	2402	165	Filing a brief in support of an appeal	 			
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing				
1004 770 2004 385 Reissue filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding				
1005 160 2005 80 Provisional filling fee	1452	110	2452	55	Petition to revive - unavoidable				
SUBTOTAL (1) (\$) 0	1453	1,330	2453	665	Petition to revive unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility Issue fee (or reissue)				
Extra Fee from Fee	1502 1503	480 640	2502 2503	240 320	Design issue fee Plant issue fee				
Total Claims Claims Delow Paid Total Claims Delow Paid Pa	1460	130	1460	130	Petitions to the Commissioner				
Independent	1807	50	1607	50	Processing fee under 37 CFR 1.17 (q)				
Claims 0 X 0	1806	180	1806	180	Submission of Information Disclosure Stmt				
Multiple Dependent X = 0	8021	40	8021	40	Recording each patent assignment per property (times number of				
Large Entity Small Entity Fee Fee Fee Fee	1809	770	2809	385	properties) Filing a submission after final rejection				
Code (\$) Code (\$) Fee Description					(37 CFR § 1.129(a))				
1202 18 2202 9 Claims in excess of 20	1810	770	2810	385	For each additional invention to be				
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	l				examined (37 CFR § 1.129(b))	—			
1204 88 2204 43 Reissue independent claims over	1801 1802	770 900	2801 1802	385 900	Request for Continued Examination (RCE) Request for expedited examination				
original patent 1205 18 2205 9 Reissue claims in excess of 20 and	'**				of a design application				
over original patent	Other fe	e (specif	ý)						
SUBTOTAL (2) (S) 0	F	ald Olimport in Transcript							
*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 210 **or number previously paid, if greater, For Reissues, see above									
SUBMITTED BY					Complete (if applicable)				
Name (Print/Type) Joyce Cahen (Atto/hey/Agent)		44,6	322	T	Telephone (650) 803-6000				
Signature Once Chen	\dashv	Date February 25, 2004							

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (end by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL		Complete if Known								
FEE IRANSWILLIAL	Application Number 09/456,429									
for FY 2004					ecember 8, 1999					
					Hua JI	_				
Effective 10/01/2003. Patent fees are subject to annual revision.					rile Garcia Baker					
Applicant claims small entity status. See 37 CFR 1.27 Art Unit				1639						
TOTAL AMOUNT OF PAYMENT (\$) 210	Attorney Docket No. P-			P-01	015-RP1					
METHOD OF PAYMENT (check all that apply)	T			FEE C	CALCULATION (continued)	_				
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None	3. AC	DITIO	NAL FE		, and a second					
Order Deposit Account:	Lamo	Entity	Small E	ntity						
Deposit	Fee Code	Fee (\$)		Fee	Fee Description Fee Paid	d				
Account 50-0344	1051	130		(\$) 65	Surcharge - late filing fee or cath	T				
Number	1052	50		25	Surcharge - late provisional filing fee	٦.				
Deposit					or cover sheet.	_]				
Account Theravance, Inc.	1053	130 2,520	,	130	Non-English specification	_				
Name	1804	920°		2,520 920		-				
The Director is authorized to: (check all that apply) Charge fee(s) indicated below	1805	1,840*		1,840*	Requesting publication of SIR prior to Examiner action Requesting publication of SIR after	4				
☐ Charge any additional fee(s) during the pendency of this application ☐ Charge fee(s) indicated below, except for the filing fee	,,,,,	1,545	1005	1,040	Examiner action					
to the above-identified deposit account.	1251	110	2251	55	Extension for rapty within first month	7 1				
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month 210	7				
1. BASIC, FILING FEE	1253	950	2253	475	Extension for reply within third month	٦ :				
Large Entity Smell Entity Fee Fee Fee Fee Description	1254	1,480	2254	740	Extension for reply within fourth month] [
Code (\$) Code (\$) Fee Paid	1255	2,010	2256	1,005	Extension for reply within fifth month	1				
1001 770 2001 385 Utility filing fee	1401	330		165	Notice of Appeal]				
1002 340 2002 170 Design filing fee	1402	330		165	Filing a brief in support of an appeal	JI				
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing	IJ				
1004 770 2004 385 Relssue filling fee 1005 160 2005 80 Provisional filling fee	1451	1,510	1451	1,510	Pelition to institute a public use proceeding					
· · · · · · · · · · · · · · · · · · ·	1452	110	2452	55	Petition to revive – unavoldable	11				
SUBTOTAL (1) (\$)0	1453	1,330		665	Petition to revive - unintentional]				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330		685	Utility issue fee (or reissue)]				
Extra Fee from Fee	1502	480		240	Design issue fee	4 1				
Claims below Paid	1503 1460	640 130		320 130	Plant issue fee	-l				
Total Ctalms20 ** = 0 X = 0	1807	50		50	Petitions to the Commissioner Processing fee under 37 CFR 1.17 (q)	- 1				
Claims = 0 X = 0	1806	180		180	Submission of Information Disclosure	11				
Multiple Dependent X □ 0					Stmt Recording each patent assignment	4				
Large Entity Small Entity	8021	40	8021 4	40	per property (times number of properties)					
Fee Fee Fee Fee Code (\$) Code (\$)	1809	770	2809 3	385	Filing a submission after final rejection	†				
Code (\$) Code (\$) Fee Description	1810	770	2010 -	205	(37 CFR § 1.129(a))	↓ I				
1201 86 2201 43 Independent claims in excess of 3	'8'0	′′′0	2810 3	385	For each additional invention to be examined (37 CFR § 1.129(b))					
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued Examination (RCE)	†				
1204 86 2204 43 ** Reissue Independent claims over original patent	1802	900		900	Request for expedited examination	↓ 				
1205 18 2205 9 ** Relssue claims in excess of 20 and			1002		of a design application					
over original patent	Other fe	e (specifi	v)			1				
SUBTOTAL (2) (\$) 0	Other fee (specify)]				
(4) 0	*Reduc	ed by Ro	sic Filing F	Fee Do	aid SURTOTAL (2) (2) 240	ı				
*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 210										
SUBMITTED DV										
Registration No.		T		\neg	Complete (if applicable)	-}				
Neme (Print/Typo) Jayco Cohen (Aliqney/Agent) Signature		44,6		-+	Telephone (650) 808-6000					

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, cell 1-800-PTO-9199 (1-800-786-9199) and select option 2.